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(Applicant's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY Docket NO.	CONFIRMATION NO.
0734,569	12/12/2003	Gary Dean Plunkett	24292.002	1862

TITLE OF INVENTION: APPARATUS FOR MOUNTING A TELEPHONE OR OTHER CORDLESS DEVICE IN A BUILDING STRUCTURE AND RELATED METHODS

APPL TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PPEV PAID BEHIND FEE	TOTAL FEES DUE	DATE PAID
nonprovisional	YES	\$700	\$300	\$0	\$1000	01/08/2007

EXAMINER	ART UNIT	CLASS-RECLASS
ESTRADA, ANGEL P	2851	174-05060

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address for Change of Correspondence Address form PTO/SB/124 attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02) so most recent attached. Use of a Customer Number is required.	2. For printing on the patent from page, list: (1) the names of up to 5 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
	1. Allen, Dyer, Doppelt, Milbrath & Gilchrist, P.A. 2. 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assigned data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE (CITY and STATE OR COUNTRY)
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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fees are submitted: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fees: (Please first supply any previously paid issue fee shown above) <input type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge fee required fees, any delinquency, or credit any overpayment, to Deposit Account Number <u>01-0484</u> (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above): <input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. <input type="checkbox"/> b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	

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Authorized Signature <u>Jacqueline E. Hartt</u>	Date <u>October 18, 2006</u>
Typed or printed name <u>Jacqueline E. Hartt, Ph.D.</u>	Registration No. <u>37845</u>

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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